

High School Night!

@ the Community Center

Dodgeball

volleyball

Basketball

Swimming

Loud music

Saturday January 17th

8pm ~ midnight

Four hours of high school fun! Sponsored by GCSAPP, FREE for pass holders \$5 for non pass holders. **Food, loud music, low lights, less rules, & no parents!** A great place to hang out with your friends and meet

new ones! You must have a parent/guardian sign a 2015 waiver good for the rest of the year! Just ask the office! See you there!



Stress & Drug Free Environment!

Any questions call: Traci Chandler 641-8427

High School Night Waiver

**RELEASE AND INDEMNIFICATION – CITY OF GUNNISON
PARTICIPANT OR PARENT MUST READ CAREFULLY BEFORE SIGNING**

In consideration for being permitted to participate in City recreational programs or activities, I hereby acknowledge, represent, and agree as follows:

I understand that the activities described herein are or may be dangerous and do or may involve risks of injury, loss, or damage. I further acknowledge that such risks may include, but not be limited to, bodily injury, personal injury, sickness, disease, death, and property loss or damage. I acknowledge that such risks may arise from a variety of foreseeable and unforeseeable circumstances connected with these activities. I have been given the opportunity to ask questions of appropriate City personnel concerning such risks and hazards, and acknowledge that and such questions have been satisfactorily answered. I have received sufficient information to make an informed decision.

By signing this Release and Indemnification, I hereby expressly assume all such risks of injury, loss, or damage to me or any third party arising out of or in any way related to the above described activities, whether or not caused by the act, omission, negligence, or other fault of the City, its officers, its employees, or by any other cause.

By signing this Release and Indemnification agreement, I further hereby waive, exempt, release, and discharge the City of Gunnison, its officers and its employees from any and all claims, demands, and actions for such injury, loss, or damage arising out of or in any way related to the above-described activities, whether or not caused by the act, omission, negligence, or other fault of the City of Gunnison, its officers or its employees, or by any other cause.

I further agree to defend, indemnify, and hold harmless the City of Gunnison, its officers and employees, insurers, and self-insurance pool, from and against all liability, claims, and demands, including any third party claim asserted against the City of Gunnison, its officers or employees, insurers, or self-insurance pool, on account of injury, loss, or damage, including without limitation, claims arising from bodily injury, personal injury, sickness, disease, death, property loss, or damage, or any other loss of any kind whatsoever, which arise out of or are in any way related to the above described activities, whether or not caused by my act, omission, negligence, or other fault, or by the act, omission, negligence, or other fault, or by the act, omission, negligence, or other fault of the City of Gunnison, its officers or its employees, or by any other cause.

If the participant listed on this Release and Indemnification is under the age of eighteen, I acknowledge that I am the parent of the above-named participant as the term "parent" is defined in C.R.S. Section 13-22-107(2)(b), and I hereby waive and release and prospective claim of the participant against the City of Gunnison, its officers and employees, for negligence, to the extent provided in C.R.S. Section 13-22-107(3), in connection with the above described activities.

I understand that participants may be photographed, and give permission for such photographic use to publicize activities for the City of Gunnison Parks and Recreation Department.

In the event of an emergency, I give consent for me or the participant to be treated at the nearest medical facility, understanding every effort will be made to contact the emergency contact person set forth on the Release and Indemnification. In such event, I shall be solely responsible for all medical expenses associated with such medical care.

This waiver is valid for all high school events hosted in 2015.

Please write legible, if we can't read them they get thrown away!

Participant name/participants Names

Date

Parent Signature

Parent Printed Name

Phone number/s: _____

Emergency contact information: name: _____ / Number _____

Private information:

*Please let the front desk know if your child/children have any medical conditions / allergies etc. that might help us be better prepared for an emergency that may occur.

As always please express to our staff and questions or concerns you may have & Thank you for letting your child come to High School Night!